

## Homeless System Design 2017

1. Describe the centralized/coordinated entry system being utilized in your region e.g. single point of contact (single location and/or single provider); hotline; decentralized (multiple coordinated locations throughout the region); or other. Include in your description the method of client contact (e.g. in person, 211 etc.) and the hours of the day that individuals may access the system.

Given the significant differences in geography, demography, and services provided throughout Region 5, intake is coordinated at multiple locations throughout the region. Refer to the Region 5 Uniform Diversion Policy included as an appendix below for more detail.

To ensure the broadest access to housing assistance services, Region 5 offers a variety of methods for clients to gain information and request services, adhering to the No Wrong Door policy. Individuals and families can enter the system through phone contact with a variety of providers (including housing providers, eviction/foreclosure service providers, and substance abuse treatment or mental health providers), through local hotlines, or through a 2-1-1 call. Service can also be initiated through in-person contact with these providers, with an outreach worker, or as part of a jail/prison discharge process.

### Ashtabula County

Ashtabula County has a decentralized, no wrong door approach. There is a high level of communication and coordination between homeless providers. Each agency has its own business hours, typically 8:30 – 5:00 Monday through Friday; however 2-1-1 is utilized in Ashtabula County. All calls that are received after Community Action's business hours are answered through Help Network of Northeast Ohio (formerly Help Hotline).

### Geauga County

While WomenSafe utilizes two locations for support services (one in Geauga County and one in Lake County), the agency has Advocates (Resident Care Specialists) available for 24-hour support at the emergency shelter located in Geauga County. While these Advocates are on duty, they arrange client intake and encourage the survivor as they begin their adjustment in living in the emergency shelter. Licensed professionals act as clinical back-up throughout the evenings, weekends, and holidays in case a survivor is in immediate need of clinical services. For entry into services provided at the office at Beacon Health (the Lake County service location), clients often call Compass Line, a service line available during business hours that helps get clients in contact with WomenSafe. COPEline, an emergency crisis management hotline, operates as the 24-hour point of entry into the program for survivors in crisis. In Fiscal Year 2016 (July 1, 2015 to June 30, 2016), WomenSafe answered 3,175 crisis calls via COPEline. Individuals not in crisis can contact 2-1-1, which also operates 24-hours per day.

### Lake County

Lake County's 2-1-1 system serves as a centralized and coordinated entry for homeless programs. It handles all requests for emergency shelter and links residents in need to appropriate diversion resources whenever possible. Callers can access 2-1-1 day or night since it is a 24/7 operation. Lake County's 2-1-1 system is operated by Lifeline, Inc., the local Community Action Agency.

### Portage County

Portage County has a decentralized, no wrong door approach. A high level of service coordination exists in the county. A person can access service to Family and Community

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Services homeless programs by phone through Miller Community House 24 hours a day, 7 days a week or by phone and in-person through Housing and Emergency Support Services, weekdays from 9 am -5pm. Individuals can walk in or call to schedule an appointment anytime Monday through Friday, 8 am to 5 pm at Coleman Professional Services. Forms can also be emailed at any time.

### Trumbull County

Individuals may call 211 to access information regarding options if they are homeless or at risk of homelessness. If assessment determines that emergency shelter is needed immediately, individuals are referred to Christy House, the emergency shelter or Someplace Safe, the domestic violence shelter. Individuals, using the “no wrong door” approach may contact any agency such as Mental Health, Transitional and Permanent Supportive Housing and HCRP providers during regular business hours where their housing needs will be assessed and immediate referral to the appropriate housing resource will be made. Forms can also be emailed at any time. Trumbull County will be participating in the Coordinated Entry Training and expects to fully implement a coordinated entry process by the end of 2017.

2. Describe how the Region is currently monitoring and evaluating its coordinated entry system. Please address how the Region is monitoring progress in the following areas:
- a. Decreasing length of time homeless
  - b. Decreasing total homelessness
  - c. Reducing returns to homelessness
  - d. Increasing the Number of individuals diverted from your system
  - e. Other items you may be evaluating, if applicable.

In May, 2011, the National Alliance to End Homelessness (NAEH) provided detailed information and guidance on the implementation of a centralized/coordinated intake system. NAEH introduced this best practice with the following explanation:

By centralizing intake and program admissions decisions, a coordinated entry process makes it more likely that families will be served by the right intervention more quickly. In a coordinated system, each system entry point (“front door”) uses the same assessment tool and makes decisions about which programs families are referred to based on a comprehensive understanding of each program’s specific requirements, target population, and available beds and services.<sup>1</sup>

While it is not practical for BOSCOC Region 5 to implement a single coordinated intake process that spans all 5 counties, we are adopting as many common practices as possible across the region. We recognize the value of a coordinated intake process and are working to implement an ever improved version in each of our counties. The following list documents what we have accomplished to date:

- Each county has implemented a diversion process (described more fully in the answer to question 7 below) that allows early intervention in a housing crisis to prevent unnecessary shelter stays and conserve shelter resources. This process taps into mainstream resources, for example, to procure Prevention, Retention & Contingency (PRC) funds for families in crisis and to link these households with other local resources such as food banks, employment programs, etc.

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<sup>1</sup> <http://www.endhomelessness.org/library/entry/one-way-in-the-advantages-of-introducing-system-wide-coordinated-entry-for->

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- All counties in the region are using the same Barrier Assessment questions to evaluate the level of assistance required for each homeless household and triages clients to the appropriate local program based on the assessment results and the program's requirements. A copy of our Barrier Assessment questions is included in our answer to question 3 below.
- All counties have conducted education sessions to help local agencies effectively direct households in crisis to the agency functioning as the primary resource for the homeless. For example, in Lake County, Lifeline, Inc., the local Community Action Agency, has done much to educate both local social service agencies and the general public on the use of 2-1-1. It is 2-1-1 that manages the county's diversion process and makes all reservations for Project Hope for the Homeless, Lake County's only homeless shelter.

As these new processes were implemented specific data were monitored to help evaluate their impact on the local systems. In Region 5 we have found that while our work to develop a coordinated intake process in each county has helped to reduce confusion within the social services ranks and among potential clients, thus making the process of securing needed help less traumatic for all involved, it is really the availability of appropriate housing programs that is the real driver behind the length of time people are homeless. In reviewing our Region 5 Bed Utilization data from May 2014, we found:

- 50+% of the region's homeless housing programs were operating at 100+% utilization
- An additional 20% of these programs were operating at 80 – 99% utilization

Most of the counties in Region 5 report that the majority of the homeless households exiting emergency shelters experience significant barriers to housing stability and require intensive support services that can only be provided via transitional/supportive housing or permanent supportive housing programs. Having open beds in these types of programs is what will ultimately reduce both the number of homeless and the length of time people are homeless.

Thus far, understanding recidivism among the homeless population in our region has been difficult. In the past, even with nearly all homeless service/housing providers in the region using HMIS to track their homeless data, it has been all but impossible to get a global view. Locally we are relying on our emergency shelters to track and report the numbers of clients returning to homelessness. But even that is not an accurate representation. In Lake County, for example, nearly 30% of Project Hope's shelter guests were originally from surrounding counties, rather than Lake County.

With HMIS now providing its users with an expanded view of a client's history, we are now seeing indications of past shelter stays and past participation in other homeless programs has been more frequent than we expected. Once HMIS is able to provide system reports on recidivism, it will help everyone in our region understand not only the frequency but also any patterns of behavior among our homeless clients that may be contributing to the problem.

3. Describe the Region's diversion process in detail. Include a discussion of the characteristics and/or situations in which an individual or family would be diverted from the homeless system.
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Region 5 recognizes the importance of diverting individuals from unnecessary stays at shelters in order to ensure beds are available for those most in need. Operating under a Uniform Diversion Policy, Region 5 providers use coordinated screening (including uniform Barrier Assessment Questions) and diversion tools as part of a "No Wrong Door" approach to housing services. Partners also adhere to Region 5 Policies and Procedures which provide detailed instructions related to client characteristics determining program eligibility, diversion, record-keeping, processes, reporting, and eligible activities. Please refer to the Region 5 documents included after this narrative as an Appendix for more information.

In Geauga County, WomenSafe recognizes the importance of empowering clients and reducing barriers. One such way is by reducing lengthy shelter stays to ensure emergency beds are continuously available for survivors of domestic violence. To meet this diversion process, WomenSafe works with survivors residing in shelter to find affordable housing and employment to ensure the survivor will be able to continue to live in an independent, safe home without returning to the abuser or returning to the emergency shelter (i.e. becoming homeless again). WomenSafe works with all survivors of domestic violence residing in the emergency shelter to secure affordable, safe, independent housing. However, the agency also screens survivors of domestic violence in the emergency shelter to see they are eligible for rental assistance. WomenSafe screens these clients based upon the criteria that they are survivors of domestic violence, currently homeless, and meet the income eligibility requirements.

If an individual does not apply for rental assistance, WomenSafe still works with the survivor of domestic violence to secure affordable housing and provides additional support via the Aftercare Coordinator and the Donations Coordinator. These two individuals assist clients with housing and financial needs by coordinating applications for funds, providing items donated by the community (furnishings, clothing, hygiene, and food) initially and then providing linkages to additional service providers and referrals like 2-1-1. By providing this assistance to clients during the transition into independent housing that is safe and secure for them (and likely their children), WomenSafe firmly believes that the barriers as to why one would return to an unsafe environment are reduced. Additionally, anything that can be done to reduce the length of stay in the emergency shelter frees up beds for survivors of domestic violence continually seeking shelter.

In Lake County, Lifeline, Inc. has conducted extensive training with local service providers and published regular public service announcements reminding Lake County residents that 2-1-1 makes referrals to agencies that can help residents with most any need. Because this process has been in place in Lake County for more than 10 years and the general population is very familiar with 2-1-1. Lifeline's 2-1-1 operators take more than 35,000 calls each year. 2-1-1 operators help callers requesting a bed in our local shelter explore all the options/resources available to divert them from shelter, but often those resources can only delay the inevitable. Referrals to mental health providers, food banks, HEAP utility assistance, foreclosure prevention, legal aid, etc. are regularly made.

In Portage County, prevention assistance is only used for households that are truly

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imminently homeless. These are households that are doubled up living with family or friends and households that have been to eviction court and will become literally homeless within 14 days. Given the small size of the emergency shelter, diversion and prevention have been vital to re-house these households that would have ended up literally homeless without this intervention.

In Trumbull County, the agencies who receive calls from persons at imminent risk of homelessness utilize the diversion policy developed by the region. Case managers utilize the barrier assessment form and other information to assist persons at imminent risk of homelessness to identify other options for housing instead of shelter placement. The HCRP homelessness prevention funds are utilized for families with court ordered evictions that face eviction with 14 days, households that are doubled up and other situations in which homelessness is imminent. Faced with limited shelter beds for the county and the fact that significant areas of the county are rural, homelessness prevention and diversion are essential to prevent persons from experiencing homelessness.

4. Describe how individuals are assessed and prioritized for specific programs based on available inventory through the Region's centralized/coordinated entry. Specifically address whether chronically homeless individuals and families, high barrier populations, and individuals entering from literal homeless situations are prioritized. Explain how the Region's coordinated entry system ensures that clients receive appropriate services.

### Ashtabula County

Catholic Charities has "walk-in" days on Mondays and Wednesdays, however, if homeless individuals come into the office on other days, they are a priority and would still be seen. Other agencies, or 2-1-1, may refer by calling the program supervisor or a caseworker at any time.

All homeless providers, mental health providers, and other community organizations convene monthly for the purpose of meeting with all individuals who are currently staying, or have stayed, at the county's only homeless shelter. A caseworker from Catholic Charities visits the emergency shelter weekly to meet with residents.

### Geauga County

At WomenSafe, the eligibility criteria for accessing this program is that the individuals or families must be survivors of domestic violence, be currently homeless, and meet the income eligibility guidelines. WomenSafe requests income verification for all clients who receive services. There are no persons that are automatically ineligible for this program until income has been verified. WomenSafe's proposed project will work with survivors of domestic violence, who are currently residing in the emergency shelter or are in immediate danger of becoming homeless due to the violence that is occurring in their homes. Those in shelter are homeless by their residence at the shelter. Those who are in immediate danger of becoming homeless have often left the abusive environment to reside temporarily with friends or family and have been guaranteed only a limited stay of a few days with these individuals. Without assistance, they would ultimately become homeless since there is an immediate safety risk to those that they are residing with and many are required to enter the emergency shelter in order to keep themselves safe.

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### Lake County

In Lake County, 2-1-1 provides the initial assessment done with all callers requesting emergency shelter. Callers are screened for veteran status first with those who can be diverted being referred to the Lake County Office of Veterans Services for help. Those who are not veterans, are assessed to see if they are eligible for PRC funds, utility assistance via HEAP, security deposit/first month rent assistance via HOME funds, etc. – all part of our local diversion process. Those we are unable to divert tend to be individuals and families that are literally homeless and the hardest to serve, all of whom receive reservations for available beds at Project Hope for the Homeless. Given that 70+ % of the clients sheltered at Project Hope have mental health diagnoses and/or substance abuse issues, it is clear that our system does prioritize those who are literally homeless and hardest to serve.

### Portage County

At Family & Community Services, diversion and pre-entry case management have been implemented through both Miller Community House and Housing and Emergency Support Services. This includes identifying and prioritizing households that are literally homeless, chronically homeless, and fleeing domestic violence. Through regular and monthly staff meetings, all housing program staff are aware of available inventory in order to ensure rapid service coordination.

Coleman Professional Services utilizes these funds to assist homeless families and individuals coming from the streets, a shelter, or place unfit for human habitation. Coleman prioritizes services for chronically homeless and hard to serve populations, providing appropriate supportive services, and coordinating with other community agencies in the area. Individuals that indicate that housing is an obstacle when completing a diagnostic assessment to be enrolled into services at Coleman are referred to the Residential Placement Coordinator who assists them with finding housing, securing services, and, when appropriate, applying for benefits.

### Trumbull County

Individuals who present as homeless are given priority for appointments with the HCRP intake staff at Humility of Mary / Emmanuel Community Care Center. During that appointment, using the coordinated assessment and intake tools as well as the barrier assessment tool, chronically homeless and hard to serve persons are identified and assessed for appropriate housing. Housing options are identified and potential barriers to each option are discussed. Early identification of high risk homeless individuals is essential in order to place individuals and families in appropriate housing within 30 days. Case managers refer clients for additional services as needed and meet with individuals on a monthly basis to assess their need for ongoing assistance. In addition case managers work directly with the emergency shelters to identify individuals at highest risk.

As the contract agency for the Trumbull County Mental Health and Recovery Board, Coleman prioritizes the HCRP funds for transitional youth ages 18-26 experiencing homelessness. Collaborating with additional resources in the community allows Coleman to address the needs of this hard to serve population. Coleman works collaboratively with other contract agencies of the Trumbull County Mental Health and Recovery Board as well as Children's Services Board.

5. Provide a detailed response to the following Housing First questions:
- Describe how the project applies Housing First principles and minimizes barriers to entry into the project.
  - Explain whether any of the following are a condition for entry into the program: the completion of a drug test, minimum income level, or employment
  - Describe how supportive services are voluntary, tailored to the client's needs and are housing focused.

Households who are homeless or most at-risk are engaged in housing first model methodologies starting from their initial contact with staff, to program entry and eventual program termination. Offers of housing program and housing location choices are also given to the household. Case management strategies assist participant households with gaining access to services that may otherwise be difficult to obtain due to specific barriers. Building trusting professional relationships also plays an important role in positive participant progress as both long term and short term goals are developed and reviewed with the participant as they work in conjunction with staff towards reaching and maintaining stability.

Region 5 adopts a Housing First model and supports that people need to access housing as immediately as possible. Region 5 believes that homelessness is first and foremost a housing problem and should be treated as such. Housing is a right to which all are entitled. Those vulnerable and at-risk families should be returned to or stabilized in permanent housing as quickly as possible and connected to the necessary resources to sustain such housing. Any issues that may have contributed to a household's homelessness can be best addressed once they are in stable housing. These individuals tend to be more responsive to interventions and social services support after they have established themselves in their own housing. Region 5 does not create additional barriers with conditions for entry into the program. Providers do not require completion of a drug test, a minimum income level, or employment prior to securing housing.

Persons defined as homeless under categories 1 & 4 are eligible for Rapid Re-Housing assistance. Persons defined as homeless under categories 2, 3 & 4 are eligible for Homeless Prevention assistance. The difference is that persons receiving prevention assistance are housed at the time they begin receiving HP assistance, and persons receiving rapid re-housing assistance are homeless at the time they begin receiving assistance.

People who are chronically homeless are a priority for the use of these funds. The definition of chronically homeless is:

1. An individual who:
  - a. is homeless and lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and
  - b. Has been homeless and living or residing in one of those locations continuously for at least 1 year or on at least 4 separate occasions in the last 3 years where the combined length of time homeless in those occasions is at least 12 months. Each period separating the occasions must include at least 7 nights of living in a situation other than a place not meant for human habitation, in an emergency shelter, or in a safe haven AND



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- c. Can be diagnosed with one or more of the following conditions: substance use disorder, serious mental illness, developmental disability, post-traumatic stress disorder, cognitive impairments resulting from brain injury, or chronic physical illness or disability
2. An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital or other similar facility, for fewer than 90 days and met all of the criteria in Paragraph A of this definition before entering that facility; or
3. A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in Paragraph A of this definition, including a family whose composition has fluctuated while the head of household has been homeless.

### **Rapid Re-Housing Assistance Eligibility “Homeless”**

Rapid Re-housing is available for persons who are homeless according to HUD’s definition, Categories 1 & 4. The short-term and medium-term assistance is intended for households who have barriers to housing.

Rapid Re- Housing	Goal: <ul style="list-style-type: none"><li>• To transition people out of homelessness quickly.</li><li>• To directly decrease overall number of homeless persons in shelters and on streets.</li></ul>
	No income requirement
	No appropriate subsequent housing options have been identified.
	Participant must meet Category 1 or 4

Following Housing First Practices organizations will:

- Screen all people who are literally homeless and ensure quick linkage to rapid re-housing assistance, based on participant needs, preferences, and resource availability
- Screens people applying for assistance to identify people who will remain literally homeless “but for” rapid re-housing assistance (ie. Have no other resources or assistance available to exit homelessness)
- Prioritizes people applying for rapid re-housing assistance who have more severe service needs and barriers to existing homelessness
- Provide access to rapid re-housing assistance without preconditions, such as sobriety or minimum income level
- Participants and staff understand that a primary goal of rapid re-housing is to end homelessness and move participants to permanent housing as quickly as possible, regardless of other personal issues or concerns
- Participant assessment focuses on barriers to obtaining and/or maintaining housing (eg. Past rental/credit/criminal history, current income, legal issues, knowledge of tenant rights and responsibilities, etc)
- Participants are assisted with creating and (for ongoing assistance) updating individualized Housing Plans, designed to re-house and stabilize participants as quickly as possible



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- Participants are provided assistance to locate and obtain permanent housing, financial assistance for move-in and stabilization costs and housing case management in order to achieve their Housing Plan goals,. This includes assistance to address tenancy problems that may jeopardize housing. Assistance is provided without additional preconditions, such as employment or sobriety; and with the understanding that housing may cost greater than 30% of participant income and be precarious
- Staff helping participants are aware of and know how to access a wide array of housing options (public/private, subsidized/unsubsidized, all local permanent supportive housing, etc) to help participants achieve their Housing Plan goals
- Staff are aware of and know how to access other community resources (eg. Legal services, subsidized childcare)that can help participants achieve their housing placement and stabilization goals

Individuals and families who meet one of the following criteria for defining Homeless, along with the above-mentioned minimum eligibility requirements are eligible under the rapid re-housing portion of HCRP:

Category 1	Literally Homeless	An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning: <ul style="list-style-type: none"><li>i. Living at place not meant for Human Habitation (car, park, bus, airport);</li><li>ii. Living in a shelter, transitional housing and hotels or motels paid for by charitable or government programs;</li><li>or</li><li>iii. Individual exiting institution, that resided there 90 days or less and lived in a shelter or place not meant for human habitation immediately before entering that institution.</li></ul>
Category 4	Fleeing/Attempting to Flee Domestic Violence DV	Any individual or family who: <ul style="list-style-type: none"><li>• Is fleeing or is attempting to flee domestic violence, dating violence, sexual assault, stalking or other danger or life-threatening conditions that have either taken place within the primary nighttime residence or has made them afraid to return to that residence or has made them afraid to return to that residence;</li><li>• Has no other residence; and</li><li>• Lacks the resources or support networks (e.g., family, friends, and faith-based or other social networks) to obtain other permanent housing.</li></ul>

### **Homelessness Prevention Eligibility:**

It is often challenging to identify persons who are housed but have a very high risk of becoming homeless. There are many people who are housed and have great need but would not become homeless if they did not receive assistance. HCRP Prevention assistance funds are to be targeted to those individuals and families at risk of becoming homeless under Categories

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1, 2 and 3. Also served through these funds are individuals and families defined in the homeless definition under Categories 2 and 4. The defining question as to whether or not a household qualifies for HCRP Prevention assistance is, “Would this individual or family be homeless *but* for this assistance?” The answer must be “yes” and supporting evidence must be documented in the client file. Priority is given to people who are precariously housed and literally homeless within 14 days.

In order to receive homeless prevention financial assistance or services funded by HCRP, all program participants must meet the following minimum criteria:

Homeless Prevention	Goal:
	Prevent moving into shelter/uninhabitable place and to regain stability.
	Participant must be “at risk of homelessness” under Category 1 , 2 or 3
	Income below 30% AMI
	Insufficient financial resources or support networks to prevent homelessness.
	No appropriate subsequent housing options have been identified.
	The household lacks the financial resources and support networks needed to obtain immediate housing or remain in its existing housing.

Following Housing First Practices organizations will:

- Screen people applying for assistance to identify people who will become literally homeless “but for” homelessness prevention assistance (ie. Are losing their housing and have no other resources or housing options)
- Prioritizes people applying for homelessness prevention assistance who have greater urgency (closer to becoming literally homeless) and/or more severe service needs (eg. People with little or no income and/or with active mental health and substance abuse issues) to prioritize applicants when resources are limited. This includes people who are diverted from emergency shelter, but who have a safe and appropriate place to stay while they receive homelessness prevention assistance.
- Provides access to homelessness prevention assistance without preconditions, such as sobriety or minimum income level
- Participants and staff understand that a primary goal of homelessness prevention is to prevent literal homelessness as quickly as possible, regardless of other personal issues or concerns
- Participant assessment focuses on barriers to obtaining and/or maintaining (eg. Past rental/criminal/credit history, current income, legal issues etc)
- Participants are assisted with creating and updating individualized Housing Plans, designed to prevent literal homelessness and stabilize participants as quickly as possible
- Participants are provided or connected to assistance to locate and obtain permanent housing, financial assistance for move-in and/or stabilization costs, and housing case management in order to achieve their Housing Plan goals. Assistance is provided without additional preconditions, such as employment or sobriety, and with the

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understanding that housing may cost greater than 30% of the participant's income and be precarious

- Staff helping participants are aware of and know how to access a wide array of housing options (public/private, subsidized/unsubsidized, all local permanent supportive housing, etc.) to help participants achieve their Housing Plan goals
- Staff are aware of and know how to access other community resources (e.g. legal services) that can help participants achieve their housing retention and stabilization goals
- Participation in services unrelated to housing retention is voluntary

### Geauga County

WomenSafe minimizes barriers to entry into the project by bringing robust support services to clients who have housing needs. WomenSafe understands domestic violence may be encountered in any environment and can affect anyone. Therefore, all of the agency's services are free and voluntary for any survivor of domestic violence regardless of ethnicity, race, religion, age, or any matter prohibited by local, state, or federal laws. WomenSafe's employees also assist clients in meeting goals defined in each client's Individualized Service Plan. The Individualized Service Plan includes goals each resident wishes to achieve during their stay at WomenSafe including, gaining housing and assistance in accessing community resources.

### Lake County

In Lake County, participants are referred to Lifeline's HCRP program by our local shelters and our local PATH Outreach team as soon as they are ready to be housed. After they complete their intake and assessment at Lifeline, they are required to go out and begin searching for a place to live—lists of local landlords can be provided if needed. They choose the place where they feel most comfortable residing and Lifeline is notified when the apartment is ready for inspection. The majority of our clients conduct this search on their own, but they are encouraged to contact their case managers, advocates and Lifeline with any questions or concerns along the way. The clients are not only receiving financial assistance, but personal support as well. Clients are encouraged to contact 211 for needed resources such as food pantries, furniture banks, etc. As a Housing First best practice, our hope is always to get them out of the shelters and into their own housing as quickly as possible, while also ensuring their safety and sustainability.

In Lifeline's HCRP Program we do not require drug tests, minimum income levels or employment to enroll in the program. Increased income and employment are goals that we can work towards after they've been successfully placed in stable housing.

When an apartment passes inspection and the client is ready to sign their lease and HCRP enrollment paperwork, they also meet with Lifeline's staff to complete a goal plan. The goal plan emphasizes financial and housing goals. The first goal is always to maintain stable housing. The client agrees to comply with the terms of the HCRP Program Agreement (this is an agreement signed at intake) as well as the terms of their lease. They also agree to notify Lifeline and their landlord immediately of any concerns that might arise. The second goal is to obtain financial stability. The client agrees to obtain and maintain a stable income, budget their finances wisely and reach out for community resources as needed. At this time, the client is also provided with contact information for both 211 and The Compass Line.

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6. Describe how the applicant coordinates with partner agencies in the provision of Housing Stability services. Include how clients access the program and whether the applicant or partner agencies conduct client intake, provide services and complete housing and lead based paint inspections, etc. Explain how the applicant verifies client eligibility and the eligibility of expenses to be charged to the grant prior to payment.

### Ashtabula County

Catholic Charities of Ashtabula County works closely with all of the other service providers in the county on a daily basis, and by regular participation in the Ashtabula County Housing Council. Additionally, all homeless providers, mental health providers, and other community organizations convene monthly for the purpose of meeting with all individuals who are currently staying, or have stayed, at the county's only homeless shelter. Many of these same agencies also participate in the Second Chance Citizen Circle, assisting ex-offenders with re-entry issues. Staff also visit Lake Erie Correctional Institution, a local prison, to provide information to inmates scheduled for release within the next 90 days.

A Catholic Charities' caseworker visits the emergency shelter weekly to personally meet with those residing at the shelter. The County's 2-1-1 is often the point of contact for those seeking housing assistance, and makes appropriate referrals. The County utilizes a "no wrong door" approach and intakes may be done at a several providers. The County utilizes a common intake, barrier assessment and diversion tool.

Catholic Charities of Ashtabula County collaborates with Ashtabula County Community Action Agency to conduct habitability and lead inspections, as appropriate.

Based upon an intake and assessment, caseworkers are responsible for determining client eligibility and ensuring that the files meet all compliance requirements including allowable expenses, income eligibility, inspections, and leases. To obtain the highest level of compliance, caseworkers utilize housing files with tabs and checklists. Prior to the Agency expending financial resources, the file is submitted to a supervisor for further audit and review.

Housing stability has been defined by New Hope - Ashtabula County Community Housing Development Organization, Inc. as occurring when clients served can maintain housing on their own, without a rental subsidy. When clients enter our program, we use various tools to capture where they are in relation to being or becoming self-sufficient and independent. Questionnaires, matrices and self-assessments are utilized during each initial in-person assessment to qualify New Hope applicants and determine their eligibility and desire to become program participants.

When applicants are enrolled in New Hope, referrals to other, local agencies are made based on the needs of each client. Whether clients who enroll in our program need assistance with security deposit, first month's rent, or access to supportive services such as food stamps, health insurance or day care, we help clients coordinate services and action steps with other agencies to shorten timeframes and streamline processes.

Once enrolled in our program, clients work with our partner agencies to identify housing. Once identified, our office coordinates a lead-based paint and housing inspection with the client and landlord. If the housing unit passes inspection, a lease, family services contract and

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housing assistance payment agreement is signed by all parties. As explained during the in-person assessment, each client is responsible for 30% of their income towards their rent if employed when entering the program or for any client who becomes employed while in our program.

### Geauga County

WomenSafe is actively involved in collaboration boards and committees that help address homeless and housing stability issues for survivors of domestic violence. For example, WomenSafe is involved in the Geauga County Domestic Violence Task Force. These partnerships include representatives from mental health centers, such as Ravenwood Health, but also partnerships with representatives from housing authorities, such as the Geauga Metropolitan Housing Authority. The partnership with the Geauga Metropolitan Housing Authority helps ensure that the survivor's housing issues are met. To verify client eligibility, WomenSafe utilizes the Barrier Assessment Questions.

WomenSafe utilizes the client income sheets, source of income, and stability to determine how much each survivor will receive. However, WomenSafe ensures that each survivor eligible will receive funding for a security deposit and first month's rent. A survivor can receive funding for the second month's rent if participating in the aftercare program and a need is observed. To participate in the rental assistance program, WomenSafe provides the 24-hour support and crisis management hotline (COPEline). COPEline is provided for any survivor to call to access support services and the emergency shelter and to arrange intake to the shelter if requested.

### Lake County

In Lake County, Lifeline, Inc. works directly with Project Hope for the Homeless (emergency shelter), Forbes House (domestic violence shelter) and Extended Housing, Inc. who does homeless outreach and manages the PATH program. By only accepting referrals to the HCRP rapid rehousing program from these three sources, Lifeline is assured that the client is literally homeless and that their homeless status is well documented. At intake, Lifeline's case manager reviews all income documentation provided by the client including copies of bank statements showing direct deposit amounts for SSI/SSDI income and for any earned income. The case manager always requires third party documentation for income from such sources as employment, TANFF, child support, alimony, etc. Copies of this documentation are maintained in the clients' hard copy files. Housing and lead based paint inspections are performed by Lifeline's Housing Coordinator who also manages their Security Deposit Program funded via Lake County's Home Investment Partnership Program (HOME) funds. These inspections are done promptly and thoroughly with results included in the clients' files.

Once the client's eligibility is confirmed and the individual is entered into the HCRP Rapid Rehousing program, the case manager documents a plan that includes information on what financial assistance will be provided and for how long. These proposed expenses are reviewed for eligibility and approved. These projected expenses for all clients are then documented in an Excel spreadsheet that tracks projections and eliminates any danger of over/under spending the allocated funding. Any variation from this initial plan is discussed with the Program Manager to ensure it continues to meet guidelines. Before expense reimbursements are submitted to Coleman Professional Services, the Region 5 Lead Agency, the Lifeline Program Manager again reviews all actual expenses and the supporting documentation to be sure no ineligible expenses are included in the reimbursement request.

### Portage County

Diversion and pre-entry case management is implemented at both Family & Community Services and Coleman Professional Services. This includes identifying local resources that can support the household and prevent shelter entry or facilitate shelter stays if emergency shelter is necessary. There is programming that provides mental health and substance abuse services, which improves access for homeless clients and an employment service designed to facilitate employment options for hard-to-serve populations. All unemployed homeless households served are enrolled in this program at shelter entry. In addition, case management staff coordinates closely with the Department of Job and Family Services, Townhall II, and other local resources to support households to achieve stability.

Family and Community Services HCRP staff conducts client intake, verifies client eligibility, provide services, complete inspections, etc. Client files are reviewed by Coleman to ensure client eligibility and eligibility of expenses.

### Trumbull County

Trumbull County utilizes the “no wrong door” approach. The use of common assessment and diversion tools ensure that a uniform approach to preventing homelessness and rapidly re-housing those who are homeless is utilized. Humility of Mary Housing/ECCC works closely with other providers in the county to meet the needs of the homeless or those at imminent risk of homelessness. Referrals are received from the homeless shelters, 211, churches, mental health agencies and other providers, PATH workers and other providers. Case managers regularly visit the homeless shelters and assist the sheltered homeless in exploring housing options. Every effort is made to rapidly re-house the homeless. HMH/ECCC has worked diligently to eliminate barriers to housing the more difficult to place clients.

Trumbull County Transitional Youth (TCTY) receives referrals from other agencies in the community, usually from the case manager or counselor. Referral paperwork includes:

- Homeless verification form as defined by HUD, also a letter from other agency verifying homelessness.
- Verification of disability completed by a health professional with the appropriate credentials (MD, DO, LPCC-S, LCSW, APRN-BC, NP)

After receiving referral, TCTY contacts client for initial intake assessment which includes, Barrier assessment, Interview assessment, income verification form, budget expense review, HMIS intake, and release of information for supporting agencies.

Referral and assessments are reviewed and eligibility is verified by assessment tools. If eligible, client is contacted to for review of rent limits and program rules and requirements. Client and partnering agency find suitable housing. Inspection and lead paint inspection is completed by HQS inspector. Client signs lease, HAP contract is entered into with landlord and applicant.

## Homeless System Design 2017

7. Describe how the Region is maximizing the use of rapid re-housing funds. Specify whether the Region's Housing Stability Program has any program restrictions preventing homeless persons from accessing rapid re-housing such as high sustainability requirements. If applicable, describe the steps the Region is taking to reduce those restrictions and maximize the number of persons accessing rapid re-housing. If the Region has areas that are not served by an emergency shelter, explain how the Region is identifying persons in those areas that are literally homeless and targeting homeless prevention funds to those most likely to end up homeless such as doubled up families.

The goal of Region 5 is to utilize Rapid Rehousing funds effectively by working to remove barriers which would prevent homeless persons from accessing available resources. As a result, the Region will, as much as possible, employ Housing First best practices. The Region 5 partners will continue to work closely with emergency shelters and other entities who encounter homeless persons to ensure that they are housed as quickly as possible. Based upon assessment and ongoing evaluation, Rapid Rehousing will be utilized to assist as many households as resources permit.

All partners are active in their respective county continuums of care where much collaboration takes place to seek appropriate services once housing is established. Homeless persons will be linked with other community services, such as employment assistance, education, training, physical, mental, and/or chemical health services, child care, transportation assistance or legal services.

For many of our counties, there is a barrier to find landlords that are willing to rent to households that have little to no income, poor credit history, criminal backgrounds, and history of rental evictions. Given this barrier, housing staff continue to outreach to landlords to engage them to help these households that are most in need in their communities in order to maximize rapid re-housing assistance. Agencies will continue to try to develop and strengthen landlord relationships. In Portage County, for example, the Housing Services Council is working to develop a Landlord Coalition that we anticipate will increase the pool of participating landlords by facilitating increased communication, providing opportunities for sharing information and lessons learned, and engaging in problem solving related to rental housing.

8. If applying for homelessness prevention funds, explain how the project targets persons with greater vulnerabilities who are most likely to become homeless. Also, if the Region is requesting more than 25% of its Housing Stability funds on Homeless Prevention, explain why such a large percentage of funds are targeted to that activity. Describe the efforts the Region is taking to increase the utilization of rapid re-housing funds among shelter providers and identify and serve non-sheltered homeless persons in the Region.

### Ashtabula County

Catholic Charities of Ashtabula County utilizes part of the housing stability funds on Homeless Prevention, which may be accessed through the coordinated entry process. It is often challenging to identify persons who are housed but have a very high risk of becoming homeless. There are many people who are housed and have great need but would not become homeless if they did not receive assistance. HCRP Prevention assistance funds are to be targeted to those individuals and families at risk of becoming homeless because of the



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following:

- Living in another's home due to economic hardship
- Losing housing within 21 days of application
- Living in severely overcrowded unit
- Precariously housed
- Is fleeing or is attempting to flee domestic violence, dating violence, sexual assault, stalking or other danger or life-threatening conditions that have either taken place within the primary nighttime residence or has made them afraid to return to that residence or has made them afraid to return to that residence

The defining question as to whether or not a household qualifies for HCRP Prevention assistance is, "Would this individual or family be homeless *but* for this assistance?" The answer must be "yes" and supporting evidence must be documented in the client file.

### Portage County

In Portage County, rapid re-housing assistance is prioritized over prevention assistance in order to serve literally homeless households first. Prevention assistance is utilized only for households that are truly imminently homeless. These are households that are doubled up living with family or friends and households that have been to eviction court and will become literally homeless within 14 days. Given the small size of the emergency shelter, diversion and prevention have been vital to re-house these households that would have ended up literally homeless without this intervention.

### Trumbull County

Humility of Mary Housing/Emmanuel Center (HMH/ECCC) is applying for homelessness prevention funding. HMH/ECCC has refocused the homelessness prevention services over the past two years and has narrowed the targeted population considerably. Homelessness prevention services are currently used to assist clients at imminent risk of homelessness. Targeted clients include those with court ordered evictions who have limited or no support systems to assist them with stable housing, families who are doubled up or couch surfing. In addition HMH/ECCC targets those who have had previous episodes of homelessness because they are more at risk of becoming homeless again when faced with imminent loss of housing. Such clients may have been difficult to house initially and another incident of homelessness may produce additional barriers to housing stability.

Several factors contribute to housing instability in Trumbull County and account for the continued need of homelessness preventive services. First, the unemployment rate in Trumbull County is the 6<sup>th</sup> highest in the state at 6.3%. Jobs that would provide enough income to make housing affordable are not readily available to our clients. The most recent American Community Survey indicates that 60% of families whose income is less than 30% of the area median income are severely rent burdened which means that they pay more than 50% of their income for rent. In addition the opioid epidemic has had a significant impact on housing stability in the county. Employers are reluctant to hire those with a history of drug usage and consistent drug use leads to unemployment and the ability to provide stable housing.

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Beginning in 2018 HMH/ECCC will focus case management services primarily on homeless individuals and families. Case managers will work throughout all of Trumbull County with other agencies to identify homeless individuals, especially the chronically homeless, in order to rapidly re-house them in the most appropriate setting. Case managers will visit the shelters more frequently to quickly identify those in need of housing and to house them as quickly as possible. Case managers will work with PATH workers and other service providers to identify any unsheltered homeless who may refuse to go into a shelter or those who may be in more rural areas of the county and have limited access to the shelter in order to rapidly re-house them.

9. Describe the type of level of services provided to ensure that households served secure and/or maintain permanent housing. Projects that are requesting more than 30% of their homelessness prevention and/or rapid re-housing request for supportive services must explain why the population served needs a high level of services.

Operating with a No Wrong Door Policy, housing staff engage and assess households at the front door in order to triage them to the housing program of their choosing and one that would best serve their needs. At times, resources are not immediately available and assistance is provided to get the individual or family on the right waiting list with referrals to transitional, veteran, or permanent supportive housing; applications for public housing and vouchers; lists of landlords; and job sources. Households are also referred to financial assistance, employment, and counseling programs to aid in housing stability as appropriate.

10. For calendar year 2016, show the number of households and/or persons who exited emergency shelter with rapid re-housing assistance. Indicate the name of the organization/project name and number of households and/or persons assisted.

<b>Number of Individuals Exiting Emergency Shelter with Rapid Rehousing Assistance in 2016</b>	
<b>Organization</b>	<b># Individuals</b>
Ashtabula County Community Housing Development Organization, Inc. (ACCHDO)	3
Catholic Charities of Ashtabula County	14 <sup>2</sup>
Coleman Professional Services (Portage)	42
Emmanuel Community Care Center (Trumbull)	17
Family & Community Services (Portage)	8
Lifeline, Inc. (Lake)	56
Trumbull Transitional Youth	6 <sup>3</sup>
WomenSafe (Geauga)	14

In Geauga County in Fiscal Year 2016 (July 1, 2015 to June 30, 2016), WomenSafe served 196 individuals (108 adults and 88 children) in the shelter. This shows the high priority of an emergency shelter, rental assistance to these homeless survivors of domestic violence, and the need for an Aftercare Coordinator and Donations Coordinator. Although not all of these individuals utilized rental assistance, they did utilize donations to furnish their new homes

<sup>2</sup> Catholic Charities of Ashtabula County also served 8 individuals from places not meant for human habitation.

<sup>3</sup> Trumbull Transitional Youth also served 5 individuals from a place not meant for human habitation and 1 from psychiatric hospital.

## Homeless System Design 2017

and also aftercare services to assist with stabilization in their new housing, decreasing the likelihood they would become homeless again or return to their abusers.

In 2016, 8 households (all of these individuals resided in the emergency shelter) have been assisted with rapid re-housing funds. This also represents a significant number of households that are remaining stable in their new housing. However, given the trauma that survivors of domestic violence have experienced, the increased stability has necessitated longer stays in the emergency shelter. In Fiscal Year 2016, the average length of stay was 36 days. However, this has allowed for increased provision of counseling services and an increase in supporting the survivors while in shelter, which has then resulted in increased rates of overall household stability.

The lack of available affordable rental units continues to be a difficult challenge. According to the Ohio Development Services Agency, median gross rent was \$818 in Geauga County in 2016. In addition, according to the U.S. Department of Housing and Urban Development, if a family spends more than 30% of their income on housing, they are considered cost burdened. Meaning, they may have difficulty affording other necessities such as food, clothing, transportation, and medical care. For Geauga County, there were 5,014 housing units for rent in 2016 (Ohio Development Services Agency, Ohio County Profiles 2016). The average size of a family residing in WomenSafe's emergency shelter is three people and many are considered to have extremely low-income of \$20,160 under the 2016 HUD Income Limits for Ohio. Taking 30%, a family with extremely low-income, should spend no more than \$6,048 or \$504 on rent. This reduces the size of available households for rent, making it incredibly difficult to locate affordable rental housing within the county as only 14.4% of the housing units are classified as rental households (Ohio Development Services Agency, Ohio County Profiles 2016). WomenSafe has creatively worked to solve these solutions by working with landlords to reduce rent, helping to locate affordable housing in neighboring counties that will meet a family's needs, etc.

11. Based on the data entered in the Performance – Historical tab in OCEAN, explain any situations in which the project did not meet the appropriate entitlement or Ohio Balance of State or local Homeless Planning Region's performance targets. Include with the explanation the relevant performance standard(s), the Continuum's goal(s) and project's actual performance.

The Region did not quite make the goal for Receipt of Non-Cash benefits and Health Insurance. The BoSCoC goal is 85% and Region 5 came in at 72%. At our next regional meeting, we will discuss the challenges that led to this lower than average performance as well as strategies that we as a region can implement in order to improve our performance in this area.

Please, also note that our Region includes a domestic violence shelter that does not participate in the regional HMIS. We have added the WomenSafe APR to the application as an attachment. WomenSafe's results are not included in the responses on the application so that our answers adhere to the data in the regional APRs.

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12. Whether your project targets Transition Age Youth (ages 18-24) or serves adult males or adult females, describe the services provided to meet the unique needs of transition age youth ages 18 through 24 who access the program. Services may include, for example, youth-specific prevention and diversion strategies; coordinated entry processes to effectively link youth experiencing homelessness to housing and services tailored to their needs; or positive youth development (PYD) and trauma informed care (TIC). Explain whether those services are provided by the applicant or through referrals to other agencies.

### Ashtabula County

The New Hope program serves families and male and female single adults. Transition Age Youth may be assisted by the New Hope program. As part of their agreement of participation they work with the New Hope staff to identify goals based on their situation. The New Hope staff will make referrals to other agencies/programs/services to meet the specific needs of the youth.

Catholic Charities of Ashtabula County has a contract with the Northeast Ohio Consortium Council of Governments, and the Ashtabula County Department of Job and Family Services to provide services for the Comprehensive Case Management & Employment Program, which is for ages 16-24. In addition to providing group financial literacy classes, the agreement includes referrals for homeless individuals, and parenting classes. The CCAC educator will be engaged three days per week with TAY; strengthening the relationship and making it easier to connect to a homeless provider.

### Geauga County

WomenSafe currently has a Memorandum of Understanding in place with Next Step/Family & Community Services, Inc., a community-based case management and stabilization program providing support for young adults ages 18-24 in Geauga and Portage Counties who have experienced hardships.

### Lake County

In Lake County, we're fortunate that our HCRP provider, Lifeline, Inc., also operates several other programs targeted at transitional age youth. Lifeline is a contract provider of the Comprehensive Case Management Employment Program, which seeks to link transitional age youth with a wide array of employment services, as well as case management to help remove barriers to employment. Our HCRP and CCMEP program coordinators are able to work closely together when we have a transitional age youth participant enroll in HCRP, in an effort to help with housing, employment and case management for any other issues the participant is dealing with. Lifeline also has a program coordinator on staff who specializes in financial literacy coaching and education and we've found this to be a valuable tool for our transitional age youth to utilize.

In addition, Lifeline's staff triages with each participant who enrolls and appropriate referrals are often made to collaborating partner agencies. For our transitional age youth participants, those sometime include referrals to Crossroads, our local youth counseling agency; or to ABLE or local vocational schools for assistance in completing GEDs or specialized career training.

### Portage County

Although the HCRP project does not specifically target this age group, this population is still able to access the services to achieve housing stability. Staff routinely refers at risk and

## Homeless System Design 2017

homeless youth to other FCS programs that target services. Through FCS's Comprehensive Case Management and Employment Program (CCMEP), youth are provided with services such as employment, mentoring, tutoring, reentry, financial literacy, leadership, and post-secondary education. Through FCS's Next Step program, youth receive intensive case management services, and through FCS's counseling services youth are provided with targeted mental health counseling and case management services.

### Trumbull County

Trumbull County Transitional Youth is a program dedicated to homeless Transition Aged Youth. We receive referrals from Coleman staff as well as other community agencies such as Valley Counseling, Green Tree Counseling, Homes for Kids and Trumbull County CSB. Once the client is made eligible for the program, we will assist them in locating housing in the community.

HMH/ECCC works closely with Coleman Professional Services' Transitional Aged Youth Housing Program. Transition aged youth who are homeless and disabled are referred to Coleman for rapid rehousing. If there are transition aged youth that they are unable to assist HMH/ECCC will work them to obtain housing. HMH/ECCC staff has some limited training in the needs of this population as well as in trauma informed care case managers do refer the youth to agencies within the county specifically tailored to help this vulnerable population. Trumbull County Mental Health and Recovery Board has a Voices of Youth program that provides opportunities for transition aged youth to come together on a monthly basis to address needs and seek opportunities to address those needs.

13. Describe the level of community partnerships or stakeholder involvement that has been developed to meet the need of TAY ages 18-24 who access the program. Partnerships and stakeholders may include collaboration with McKinney-Vento local education liaisons, child welfare agencies, a local runaway and homeless youth program provider, or other appropriate agencies/programs. Explain whether those collaborations have been established by the applicant and if partnership agreements or MOUs are in place to carry out referrals and/or services. If such agreements do exist, include the name of the entity and a short description of what they bring to the effort to end youth homelessness.

### Ashtabula County

There have been many administration changes in the school districts of Ashtabula County. As a result, Catholic Charities of Ashtabula will communicate to all of the McKinney-Vento local education liaisons about local services for homeless youth. The Ashtabula County Children Services Board collaborates with local homeless providers as well as other service agencies. As stated in Question 12, New Hope will assist the TAY and refer them to local agencies/programs/services as appropriate.

### Geauga County

WomenSafe has a Memorandum of Understanding in place with Next Step/Family & Community Services, Inc., who assists those of ages 18-24 in proving housing and case management services. Through this partnership, survivors of domestic violence can reside in either at WomenSafe's emergency shelter or at Next Step/Family & Community Services, Inc., but receive support services through the other agency. In addition, WomenSafe has trained employees, who have knowledge about the McKinney-Vento act, and act as an advocate on behalf of the clients.

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### Lake County

In Lake County, we have approximately 20 different groups active within our local Continuum of Care, including representatives from local children's counseling providers and youth services agencies. The CoC meets every other month to discuss trends, emerging issues and to work on projects to help alleviate homelessness in our community. The added participation of youth services providers allows us to keep a focus on our efforts to end youth homelessness.

Lifeline, the HCRP provider for Lake County, also has a signed contract as a provider of CCMEP services with our local Workforce Development Board and Job & Family Services. CCMEP exclusively provides employment services and wrap around case management to transitional age youth, some who are homeless. It is our hope that by combining our HCRP and CCMEP programs when appropriate, that we can teach our youth employment skills and help them secure living wage jobs so that they are able to maintain their housing and do not return to homelessness in the future.

### Portage County

Collaborations include referrals to and from JFS, local homeless and housing services, MHRB, public schools, KSU. All housing, homeless, and youth providers work together towards the same goals to stabilize housing for this age group. FCS is in a unique position, as they provide a continuum of homeless and housing services. Monthly, the Housing Team meets to discuss updates on program availability and conducts case conferencing in order to provide comprehensive support to households in need. Members of the Housing Team include: Miller Community House (emergency shelter), Safer Futures (domestic violence shelter), PATH (transitional housing), Freedom House (veteran's transitional housing), SSVF (homeless prevention/rapid re-housing for veterans), Next Step (case management for transitional youth), Root House/PARC/OTTR (AOD programs), and staff from Coleman Professional Services housing programs.

### Trumbull County

If the client of Trumbull County Transitional Youth wishes to receive Mental Health services a referral can be made to Coleman or other area agency to assist them. If the client agrees, a referral can be filled out to receive employment services through Coleman or through Opportunity for Ohioans with Disabilities to assist the client with obtaining employment. Voices of Youth is a committee in Trumbull County that meets every other month to discuss housing, transportation, employment and other community resources for our Youth. Community agencies attend these meetings and the youth population is encouraged to attend to voice their concerns, opinions and suggestions on how to better serve their population. Trumbull County has also started a YouthMOVE chapter.

As a whole, Trumbull County has not developed a formal networking process to address the needs of Transition aged youth. However, HMH/ECCC works closely with many providers who work with Transition aged youth. Sr. Jean Orsuto is an active member of the Trumbull County Family and Children First Council and is a board member of Trumbull County Children's Services. Both organizations identify and refer homeless transition aged youth. In most of the smaller communities in Trumbull County the McKinney-Vento local education liaisons are the school superintendents, however, HMH/ECCC has established relationships with teachers and guidance counselors in the schools who often call the agency directly when a housing issue arises with transitional age youth. There are currently no formal relationships (MOU) this is an issue that the Trumbull County Housing Collaborative will address more formally in 2018.

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|---|
| 14. If your program or community has not yet developed or is in the very early stages of developing a strategy to end youth homelessness, describe the actions you expect to take by June 20, 2018. |
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Throughout Region 5, providers will reach out to the education liaisons in our counties and continue relationships with local child protection agencies. Ashtabula County Community Housing Development Organization Inc. will work with the Ashtabula Housing Council and Region 5 partners to identify a strategy that will serve TAY and work to end youth homelessness. Lake County is well on its way to end youth homelessness, but additional plans for the future include increasing the number of youth providers on our local CoC, including school liaisons.

The Trumbull County Housing Collaborative (Sr. Jean Orsuto the director of ECCC is the current chair) will convene a task force by September 2017 which will consist of representatives from Coleman Professional Services, Trumbull County Mental Health and Recovery Board, Trumbull County Children's Services, McKinney-Vento school liaisons, Trumbull County Family and Children First Council and other providers who work with transition aged youth at risk of homelessness to begin to develop a coordinated strategy to end youth homelessness. Our goal would be to have the plan in place by June 20, 2018.



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# **HOMELESS CRISIS RESPONSE PROGRAM**

## **Region 5 Policies and Procedures**

**January 2017**

### **Background**

The Homeless Crisis Response Program (HCRP) is designed to provide financial assistance and services to prevent individuals and families from becoming homeless (homelessness prevention), or to help those who are experiencing homelessness to be quickly re-housed and stabilized (rapid re-housing). This region focused on the use of funds for Rapid Re-housing.

Region 5 adopts a Housing First model and supports that people need to access housing as immediately as possible. Region 5 believes that homelessness is first and foremost a housing problem and should be treated as such. Housing is a right to which all are entitled. Those vulnerable and at-risk families should be returned to or stabilized in permanent housing as quickly as possible and connected to the necessary resources to sustain such housing. Any issues that may have contributed to a household's homelessness can be best addressed once they are in stable housing. These individuals tend to be more responsive to interventions and social services support after they have established themselves in their own housing.

Persons defined as homeless under categories 1 & 4 are eligible for Rapid Re-Housing assistance. Persons defined as homeless under categories 2, 3 & 4 are eligible for Homeless Prevention assistance. The difference is that persons receiving prevention assistance are housed at the time they begin receiving HP assistance, and persons receiving rapid re-housing assistance are homeless at the time they begin receiving assistance.

People who are chronically homeless are a priority for the use of these funds. The definition of chronically homeless is:

1. An individual who:
  - a. is homeless and lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and
  - b. Has been homeless and living or residing in one of those locations continuously for at least 1 year or on at least 4 separate occasions in the last 3 years where the combined length of time homeless in those occasions is at least 12 months. Each period separating the occasions must include at least 7 nights of living in a situation other than a place not meant for human habitation, in an emergency shelter, or in a safe haven AND
  - c. Can be diagnosed with one or more of the following conditions: substance use disorder, serious mental illness, developmental disability, post-traumatic stress disorder, cognitive impairments resulting from brain injury, or chronic physical illness or disability
2. An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital or other similar facility, for fewer than 90 days and met all of the criteria in Paragraph A of this definition before entering that facility; or
3. A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in Paragraph A of this definition, including a family whose composition has fluctuated while the head of household has been homeless.

### **Rapid Re-Housing Assistance Eligibility “Homeless”**

Rapid Re-housing is available for persons who are homeless according to HUD’s definition, Categories 1 & 4. The short-term and medium-term assistance is intended for households who have barriers to housing.

Rapid Re- Housing	Goal: <ul style="list-style-type: none"><li>• To transition people out of homelessness quickly.</li><li>• To directly decrease overall number of homeless persons in shelters and on streets.</li></ul>
	No income requirement
	No appropriate subsequent housing options have been identified.
	Participant must meet Category 1 or 4

Following Housing First Practices organizations will:

- Screen all people who are literally homeless and ensure quick linkage to rapid re-housing assistance, based on participant needs, preferences, and resource availability
- Screens people applying for assistance to identify people who will remain literally homeless “but for” rapid re-housing assistance (ie. Have no other resources or assistance available to exit homelessness)
- Prioritizes people applying for rapid re-housing assistance who have more severe service needs and barriers to existing homelessness
- Provide access to rapid re-housing assistance without preconditions, such as sobriety or minimum income level
- Participants and staff understand that a primary goal of rapid re-housing is to end homelessness and move participants to permanent housing as quickly as possible, regardless of other personal issues or concerns
- Participant assessment focuses on barriers to obtaining and/or maintaining housing (eg. Past rental/credit/criminal history, current income, legal issues, knowledge of tenant rights and responsibilities, etc)
- Participants are assisted with creating and (for ongoing assistance) updating individualized Housing Plans, designed to re-house and stabilize participants as quickly as possible
- Participants are provided assistance to locate and obtain permanent housing, financial assistance for move-in and stabilization costs and housing case management in order to achieve their Housing Plan goals,. This includes assistance to address tenancy problems that may jeopardize housing. Assistance is provided without additional preconditions, such as employment or sobriety; and with the understanding that housing may cost greater than 30% of participant income and be precarious
- Staff helping participants are aware of and know how to access a wide array of housing options (public/private, subsidized/unsubsidized, all local permanent supportive housing, etc) to help participants achieve their Housing Plan goals

- Staff are aware of and know how to access other community resources (eg. Legal services, subsidized childcare) that can help participants achieve their housing placement and stabilization goals

Individuals and families who meet one of the following criteria for defining Homeless, along with the above-mentioned minimum eligibility requirements are eligible under the rapid re-housing portion of HCRP:

Category 1	Literally Homeless	An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning: <ul style="list-style-type: none"> <li>i. Living at place not meant for Human Habitation (car, park, bus, airport);</li> <li>ii. Living in a shelter, transitional housing and hotels or motels paid for by charitable or government programs;</li> <li>or</li> <li>iii. Individual exiting institution, that resided there 90 days or less and lived in a shelter or place not meant for human habitation immediately before entering that institution.</li> </ul>
Category 4	Fleeing/Attempting to Flee Domestic Violence DV	Any individual or family who: <ul style="list-style-type: none"> <li>• Is fleeing or is attempting to flee domestic violence, dating violence, sexual assault, stalking or other danger or life-threatening conditions that have either taken place within the primary nighttime residence or has made them afraid to return to that residence or has made them afraid to return to that residence;</li> <li>• Has no other residence; and</li> <li>• Lacks the resources or support networks (e.g., family, friends, and faith-based or other social networks) to obtain other permanent housing.</li> </ul>

### **Homelessness Prevention Eligibility:**

It is often challenging to identify persons who are housed but have a very high risk of becoming homeless. There are many people who are housed and have great need but would not become homeless if they did not receive assistance. HCRP Prevention assistance funds are to be targeted to those individuals and families at risk of becoming homeless under Categories 1, 2 and 3. Also served through these funds are individuals and families defined in the homeless definition under Categories 2 and 4. The defining question as to whether or not a household qualifies for HCRP Prevention assistance is, “Would this individual or family be homeless *but* for this assistance?” The answer must be “yes” and supporting evidence must be documented in the client file. Priority is given to people who are precariously housed and literally homeless within 14 days.

In order to receive homeless prevention financial assistance or services funded by HCRP, all program participants must meet the following minimum criteria:

Homeless Prevention	Goal: Prevent moving into shelter/uninhabitable place and to regain stability.
	Participant must be “at risk of homelessness” under Category 1 , 2 or 3
	Income below 30% AMI
	Insufficient financial resources or support networks to prevent homelessness.
	No appropriate subsequent housing options have been identified.
	The household lacks the financial resources and support networks needed to obtain immediate housing or remain in its existing housing.

Following Housing First Practices organizations will:

- Screen people applying for assistance to identify people who will become literally homeless “but for” homelessness prevention assistance (ie. Are losing their housing and have no other resources or housing options)
- Prioritizes people applying for homelessness prevention assistance who have greater urgency (closer to becoming literally homeless) and/or more severe service needs (eg. People with little or no income and/or with active mental health and substance abuse issues) to prioritize applicants when resources are limited. This includes people who are diverted from emergency shelter, but who have a safe and appropriate place to stay while they receive homelessness prevention assistance.
- Provides access to homelessness prevention assistance without preconditions, such as sobriety or minimum income level
- Participants and staff understand that a primary goal of homelessness prevention is to prevent literal homelessness as quickly as possible, regardless of other personal issues or concerns
- Participant assessment focuses on barriers to obtaining and/or maintaining (eg. Past rental/criminal/credit history, current income, legal issues etc)
- Participants are assisted with creating and updating individualized Housing Plans, designed to prevent literal homelessness and stabilize participants as quickly as possible
- Participants are provided or connected to assistance to locate and obtain permanent housing, financial assistance for move-in and/or stabilization costs, and housing case management in order to achieve their Housing Plan goals. Assistance is provided without additional preconditions, such as employment or sobriety, and with the understanding that housing may cost greater than 30% of the participant’s income and be precarious
- Staff helping participants are aware of and know how to access a wide array of housing options (public/private, subsidized/unsubsidized, all local permanent supportive housing, etc.) to help participants achieve their Housing Plan goals
- Staff are aware of and know how to access other community resources (eg. Legal services) that can help participants achieve their housing retention and stabilization goals
- Participation in services unrelated to housing retention is voluntary

Individuals and families defined as At Risk of Homelessness under the following categories are eligible for assistance:

Category 1	Individuals and Families	<p>Individuals and families:</p> <ul style="list-style-type: none"> <li>• Annual income below 30%</li> <li>• Lack sufficient resources or support networks to prevent literal homelessness; AND</li> <li>• <u>Meet at least one of the following seven conditions:</u> <ol style="list-style-type: none"> <li>1. Moved two or more times due to economic reasons in 60 days prior to application</li> <li>2. Living in another's home due to economic hardship</li> <li>3. Losing housing within 21 days of application</li> <li>4. Living in hotel/motel NOT paid by charitable or government program</li> <li>5. Living in severely overcrowded unit (more than 2 people in SRO/efficiency or in larger housing more than 1.5 persons per room)</li> <li>6. Exiting publicly funded institution or system of care</li> <li>7. Lives in housing associated with instability and increased risk of homelessness, per recipient Consolidated Plan.</li> </ol> </li> </ul>
Category 2	Unaccompanied Children and Youth	<p>Unaccompanied children and youth:</p> <ul style="list-style-type: none"> <li>• Does not include children/youth who qualify under the homeless definition</li> <li>• Does not include parents or guardians</li> <li>• Regulations included the list of applicable other federal statutes</li> </ul>
Category 3	Families with Children and Youth	<p>Families with children and youth:</p> <ul style="list-style-type: none"> <li>• Children /youth who qualify under the Education for Children and Youth program (§725(2) McKinney-Vento Act) and the parents or guardians that child/youth if living with him/her.</li> </ul>

Individuals and families that fall under the homeless definition can be served through prevention funds under the following categories:

Category 2	Imminent Risk of Homelessness	<p>Individuals and families:</p> <ul style="list-style-type: none"> <li>• Annual income below 30%</li> <li>• AND</li> <li>• Who will imminently lose their primary nighttime residence provided that: <ol style="list-style-type: none"> <li>1. Residence will be lost within 14 days</li> <li>2. No subsequent residence has been identified</li> <li>3. Lack sufficient resources or support networks to prevent literal homelessness;</li> </ol> </li> </ul>
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Category 4	Fleeing or attempting to flee domestic violence	Any individual or family who: <ul style="list-style-type: none"> <li>Is fleeing or is attempting to flee domestic violence, dating violence, sexual assault, stalking or other danger or life-threatening conditions that have either taken place within the primary nighttime residence or has made them afraid to return to that residence or has made them afraid to return to that residence;</li> <li>Has no other residence; and</li> <li>Lacks the resources or support networks (e.g., family, friends, and faith-based or other social networks) to obtain other permanent housing.</li> </ul>
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- The household must be **below 30%** of the Area Median Income (AMI). Please refer to the appropriate year's Area Median Income limits. Income limits are updated annually and new limits should be utilized when released. Income limits are available on HUD's website at <http://www.huduser.org/DATASETS/il.html>. Income eligibility must be documented in the client file.
- Case Management Services must be provided on a monthly basis, unless prohibited by the Violence Against Women Act (VAWA) or Family Violence and Prevention Services Act (FVPSA), and provide housing stability planning to assist participant to retain permanent housing post-ESG assistance. The limits are that the assistance cannot exceed 30 days during the period the participant is seeking permanent housing and 24 months during the period the participant is living in permanent housing.

### **Recordkeeping, Process and Reporting**

Caseworkers must provide evidence of homeless prevention and homelessness by way of the following:

1. Screening, intake and certification forms for all persons seeking assistance.
2. Documentation of annual income. For homelessness prevention income is addressed at time of intake. For rapid re-housing, income is gathered at time of entering but not used for eligibility until re-certification.
3. Certification that participant has insufficient financial resources and support networks.
4. Most reliable evidence to show lack of resources/support network is source documentation.
5. Documentation of homelessness (refer to Source Documentation Section)
6. Refer to Region 5 checklist for requirements

Any household provided with financial assistance through HCRP must have at least an initial consultation with a case manager or other authorized representative who can determine the appropriate type of assistance to meet their needs. Persons ineligible for HCRP should be referred to the appropriate resources or services provider that can assist them.

### **Third Party Documentation for certification and income verification:**



### **Source documentation is most preferred for third party documentation**

- Source Documentation – Original documentation from a third party, official communication on letterhead or statement template  
Examples – Termination of employment letter  
Social Security Administration letter  
Eviction Notice  
Statements – paystubs, bank/checking statements
- Written – Official communication issued on agency stationery or program template. Signed and dated by appropriate representative of third party. Letters should share clients living situation and/or economic hardship. Example: Letter from a case manager, service provider, friend/family member, employer
- Oral – Statement from the client and recorded by caseworker.
- The region maintains the most recent requirements for all documentation as presented by COHHIO and ODSA

### **Income Inclusion/Income Documentation**

Type of Income	Examples of acceptable documentation
Wages & Salary (initial/recertification) <input type="checkbox"/> Written 3 <sup>rd</sup> Party <input type="checkbox"/> Oral 3 <sup>rd</sup> Party <input type="checkbox"/> Self-declaration & brief explanation	Payment Statement, statement of income from employer/source income
Self-employment & Business Income (initial/recertification) <input type="checkbox"/> Written 3 <sup>rd</sup> Party <input type="checkbox"/> Self-declaration & brief explanation	Most recent financial statement
Interest & Dividend Income (initial/recertification) <input type="checkbox"/> Written 3 <sup>rd</sup> Party <input type="checkbox"/> Self-declaration & brief explanation	Most recent interest or dividend income statement
Pension/Retirement Income (initial/recertification) <input type="checkbox"/> Written 3 <sup>rd</sup> Party <input type="checkbox"/> Oral 3 <sup>rd</sup> Party <input type="checkbox"/> Self-declaration & brief explanation	Most recent benefit notice, pension statement or other payment statement from pension provider
Unemployment & Disability income (initial/recertification) <input type="checkbox"/> Written 3 <sup>rd</sup> Party <input type="checkbox"/> Oral 3 <sup>rd</sup> Party <input type="checkbox"/> Self-declaration & brief explanation	Most recent benefit or disability income notice from SSI, statement from SSI
TANF/Public Assistance (initial/recertification) <input type="checkbox"/> Written 3 <sup>rd</sup> Party <input type="checkbox"/> Oral 3 <sup>rd</sup> Party <input type="checkbox"/> Self-declaration & brief explanation	Most recent benefit or income notice or statement from public assistance administrator
Alimony, Child Support & Foster Care Income (initial/recertification) <input type="checkbox"/> Written 3 <sup>rd</sup> Party <input type="checkbox"/> Oral 3 <sup>rd</sup> Party <input type="checkbox"/> Self-declaration & brief explanation	Court Order Cancelled checks
Armed Forces Income (initial/recertification) <input type="checkbox"/> Written 3 <sup>rd</sup> Party <input type="checkbox"/> Oral 3 <sup>rd</sup> Party <input type="checkbox"/> Self-declaration & brief explanation	Payment statement Statement of income from government official/agency
No Income (initial/recertification) <input type="checkbox"/> Self-declaration & brief explanation	

### **Client File**

It is the responsibility of each agency to maintain appropriate records to document, respective to their agency, all client interaction while enrolled in the program and years subsequent as required by law. Client files can, but are not limited to, contain intake/assessment/screening forms, signed release(s) of information, HMIS authorizations, case management notes, signed verification forms, and payment remittance.

### **When assessing and assisting a client:**

- Households should be reasonably expected to maintain housing stability following receipt of assistance.
- Clients receiving one “type” of assistance under another program may be eligible for other types of HCRP assistance, as long as they are not also receiving that “type” of assistance through another source.
- Payments must not be made to program participants, but only to third parties, such as landlords or utility companies.
- The amount of the assistance must be the **minimum** amount needed to prevent the client from becoming homeless.

### **Eligible Activities**

- Rental Assistance: - up to twelve (12) months during any three (3) year period.
- HCRP funds **cannot** be provided to eligible individuals or families for the same period of time and for the same cost types that are being provided through another federal, state, or local program. Note : A household receiving an ongoing rental subsidy cannot receive HCRP rental assistance. This includes Example: First month’s or current rent for subsidized (income based) housing.
  - Short-term rental assistance (1-3 months). If a household receives short-term assistance and then needs additional assistance, they are eligible to do so as long as they are certified as eligible for the additional assistance.
  - Medium Term Rental Assistance – greater than three (3) months, less than nine (9) months
  - Must be in compliance with HUD’s standard of rent reasonableness/fair market rent.
  - Rental assistance may not be used to provide financial assistance or services in any units that are owned or operated by a sub-grantee or sub-recipient.
  - A lease must be in place and the program participant must be on the lease in order to use HCRP funds for rent.
  - Families or individuals who are precariously housed (ie. doubled-up with family or friends) are eligible for prevention assistance if determined that they would be “homeless but for this assistance” and they meet all other HCRP eligibility criteria.
- Rental Arrears (Late payments):
  - Assistance may be used to pay up to (one time) six (6) months of rental arrears regardless of when they were incurred, provided that the existence of the arrears prevents the participant from obtaining and maintaining housing including any late fees.
  - Rental Assistance Agreement – owner must give a copy of any notice to the participant to vacate the housing unit to agency. This is in addition to the rental agreement between landlord and tenant.
  - Arrears may be paid if the payment enables the client to remain in the housing unit for which the arrears are being paid or move to another unit.
  - Any arrearage paid must be included in determining the total period of the program participant’s assistance, which may not exceed twelve (12) months.

- Rental arrears can be paid on behalf of a person receiving a subsidy from another public program because it represents a different time period and cost type than the rental subsidy (ie. the arrears represent a back payment of the client portion, and the current rental assistance is a forward payment).
- HCRP funds may be used to pay for late fees associated with rent arrears, as long as the payment enables the program participant to remain housed or become rehoused.
- Deposits:
  - Security deposits. A lease must be in place and the program participant must be on the lease in order to use HCRP funds for a security deposit. Therefore, assistance could not be provided to an individual renting from a friend or relative if a legal lease is not in place. Security Deposits are limited to one time every two years unless there are extenuating circumstances such as a fire. The decision is up to the agency providing the funds.
  - Utility deposits. The program participant or a member of his/her household must have an account in his/her name with a utility company.
- Utility Payments:
  - Assistance for up to 12 months of utility payments, including up to six (6) months (one time) of utility payments in arrears.
  - HCRP funds may be used to pay for late fees associated with utility arrears, as long as the payment enables the program participant to remain housed or become rehoused.
  - The program participant or a member of his/her household must have an account in his/her name with a utility company or proof of responsibility to make utility payments, such as cancelled checks or receipts in his/her name from a utility company.
  - Utilities eligible for assistance are: heat, electricity, water, sewer and garbage collection. Telephone and cable services are not eligible.
- Moving Cost Assistance:
  - Reasonable moving costs, such as truck rental, hiring a moving company or short-term storage fees for a maximum of three months or until the program participant is in housing, whichever is shorter.
- Motel and Hotel Vouchers:
  - Reasonable and appropriate motel and hotel vouchers for up to 30 days, if no appropriate shelter beds are available and subsequent rental housing has been identified, but is not immediately available for move-in by the program participants.

## **Financial Assistance**

Region 5 financial assistance will usually not exceed \$5,000 per household, however, this amount may be adjusted based upon client need, rent reasonableness and Fair Market of each County, household size and circumstance. Documentation supporting the decision must be placed in the client file.

Clients may be expected to pay a portion of any financial assistance. The client portion will be determined by the caseworker, and based upon ongoing client assessments.

## **Re- Evaluations/Certification/Follow-up**

1. At entry and every 90 days after entering program.

## 2. 6 month follow up after client is exited, attempts for follow up must be documented

### **Inspections**

- Any financial assistance through HCRP requires a Habitability Inspection.
- Housing constructed prior to 1978 and occupied by families with children under the age of six (6) or where a pregnant individual is in the household must have a visual lead inspection conducted by a HUD-certified Visual Assessor.
- Client cannot move into the new household until the housing inspection is completed and passes inspection
- The HUD-certified Visual Assessor will contact the landlord to schedule an inspection time.
- The results of the inspection are submitted to the Agency.
- If the inspection fails, the landlord is notified of the findings and the need for any corrective action.
- If the landlord refuses to take corrective action, the agency cannot assist the client with that unit.
- HCRP funds used for rental assistance to place a homeless household into housing or to move a household to different housing must have a housing inspection conducted. Please refer to and utilize *HCRP Housing Habitability Standards Inspection Checklist*. Completed checklist should be placed in client file.
- If the participant is receiving medium-term assistance for longer than twelve (12) months, an inspection must be conducted annually.
- If a new family moves into the same unit, a new inspection must be conducted.
- If a program participant is moving into a unit and using another subsidy program that requires an inspection, staff from the other program may conduct the inspection, as long as they follow the HCRP standards. Example: Local housing authorities.

### **Housing Relocation and Stabilization Services “Service Costs” Eligible Activities**

(All eligible HCRP activities must be directly related to housing)

- Housing Stability Case Management - Arrangement, coordination, monitoring, and delivery of services related to meeting the housing needs of program participants and helping them obtain housing stability.
- Outreach and Engagement - Services or assistance designed to publicize the availability of programs to make persons who are homeless or almost homeless aware of these and other available services and programs.
- Housing Search and Placement - Services or activities designed to assist individuals or families in locating, obtaining, and retaining suitable housing. Activities which may be included are tenant counseling, assisting individuals and families to understand leases, securing utilities, making moving arrangements, representative payee services concerning rent and utilities, and mediation and outreach to property owners related to locating or retaining housing.
- Credit Repair - Services that are targeted to assist program participants with critical skills related to household budgeting, money management, accessing a free personal credit report, and resolving personal credit issues.
- Mediation – to prevent the participant from losing housing.
- Legal Services – to resolve legal problems prohibiting participant from obtaining or losing housing.

### **Ineligible Activities**

- Shelters
- Transitional housing facility
- Damage costs incurred in an apartment/home
- Child care
- Employment training
- Mortgage assistance, fees, taxes or other costs of refinancing
- Credit card bills or other consumer debt
- Car repairs
- Transportation or travel costs
- Food
- Medical or dental care
- Prescriptions
- Housing rehabilitation
- Clothing and grooming items
- Home furnishings
- Pet care
- Work or education related materials
- Entertainment activities
- Assisting persons in obtaining expungements and/or pardons of their criminal records
- Re-entry advocacy
- Helping persons obtain jobs
- Developing discharge planning programs in mainstream institutions such as hospitals, jails, or prisons
- Certifications, licenses, and general training classes for program participants or service providers
- Assistance to youth who are wards of the state

### **Terminating Client Services**

Clients that have received more than a one-time assist and are not compliant with their action plan may be subject to termination of services. In the event the client's services are terminated, a letter is sent to the client explaining the reason(s) for the end of services. Clients may appeal the termination and their case will be reviewed to determine if the case will be reopened. Each agency will identify a contact person. It is a best practice to send a letter to a participant once assistance has ended.

### **Homeless Outreach**

All counties will work in collaboration with their shelters and/or PATH programs with regard to street outreach.

### **Auditing**

All files will be available for auditing by the appropriate entity.

### **HMIS**

All HCRP clients are entered in to the HMIS system when providing financial assistance. A unique id number is generated, recorded and noted on client's file and documents. HMIS Universal Data elements will be collected on the Region 5 Assessment form. All agencies will be in compliance with all HMIS requirements. Domestic violence shelters must maintain data in a comparable data base.

### **Agency Policy Compliance**

In accordance with applicable regulatory bodies and local, state, and federal laws, each agency must maintain a Confidentiality Policy, Nondiscrimination and Equal Opportunity Policy, Financial Management Policy, and a Rent Reasonableness/Fair Market Value Policy. All HCRP practices must comply with each respective agency's policy on these topics.

### **Performance Management Standards**

All agencies who are receiving HCRP funds will be adhering to the performance standards in the Performance Management Plan from the Ohio Balance of State COC. Please see attached.

### **Website**

The Region 5 website is [www.ohioboscocregion5.org](http://www.ohioboscocregion5.org)

# **BOSCO Region 5**

## **Uniform Diversion Policy**

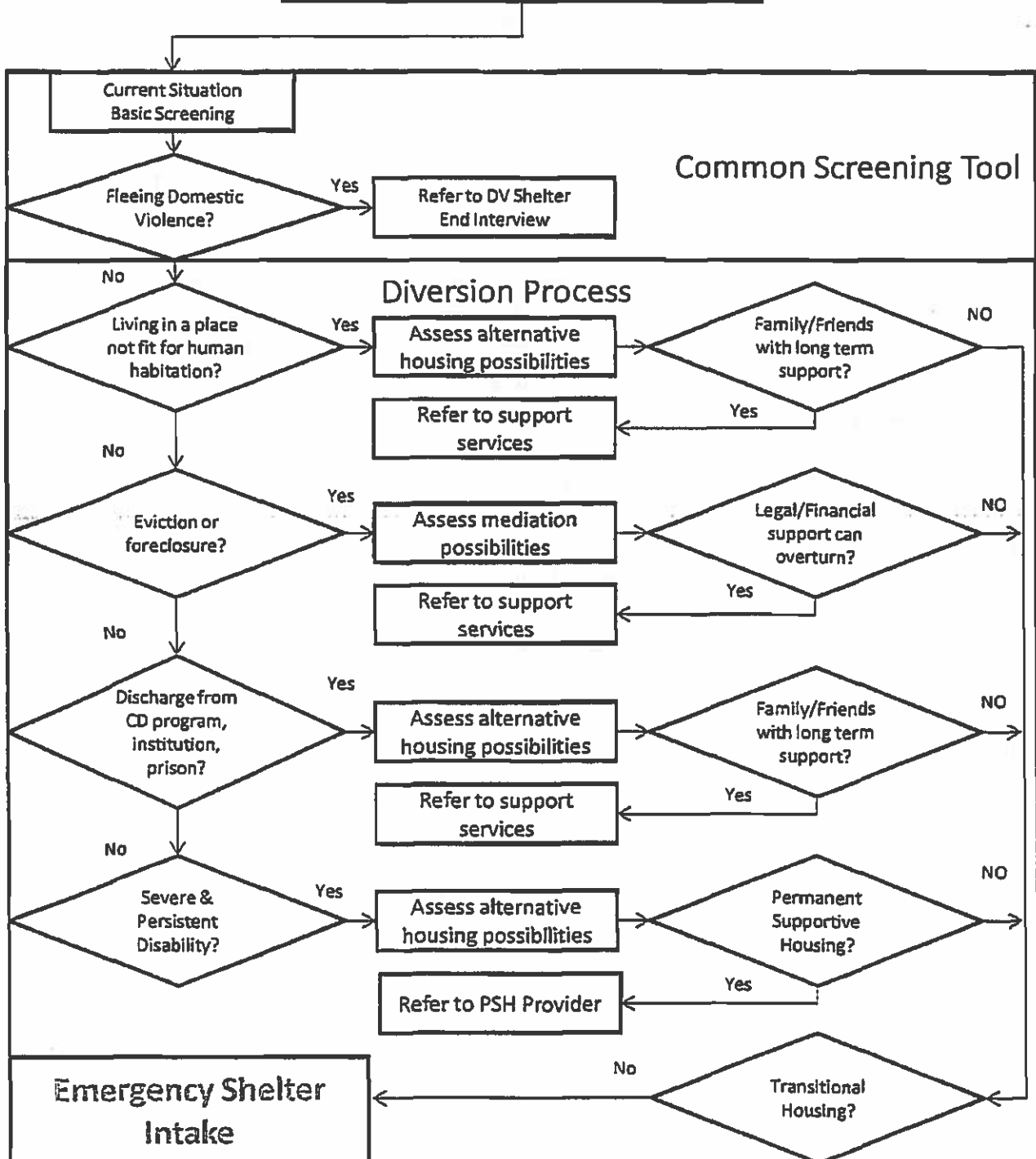
**The Balance of State Region 5 will use a coordinated diversion tool and believes that diversion is a necessary part of the process to end homelessness. This diversion tool will be used when a household is identified as having the ability to avoid entering a shelter.**

**Region 5 will use a “No Wrong Door” approach to help those households experiencing a housing crisis. All local organizations that may encounter such households will participate in our regional meetings and agree to implement the screening tool and diversion tool as appropriate.**

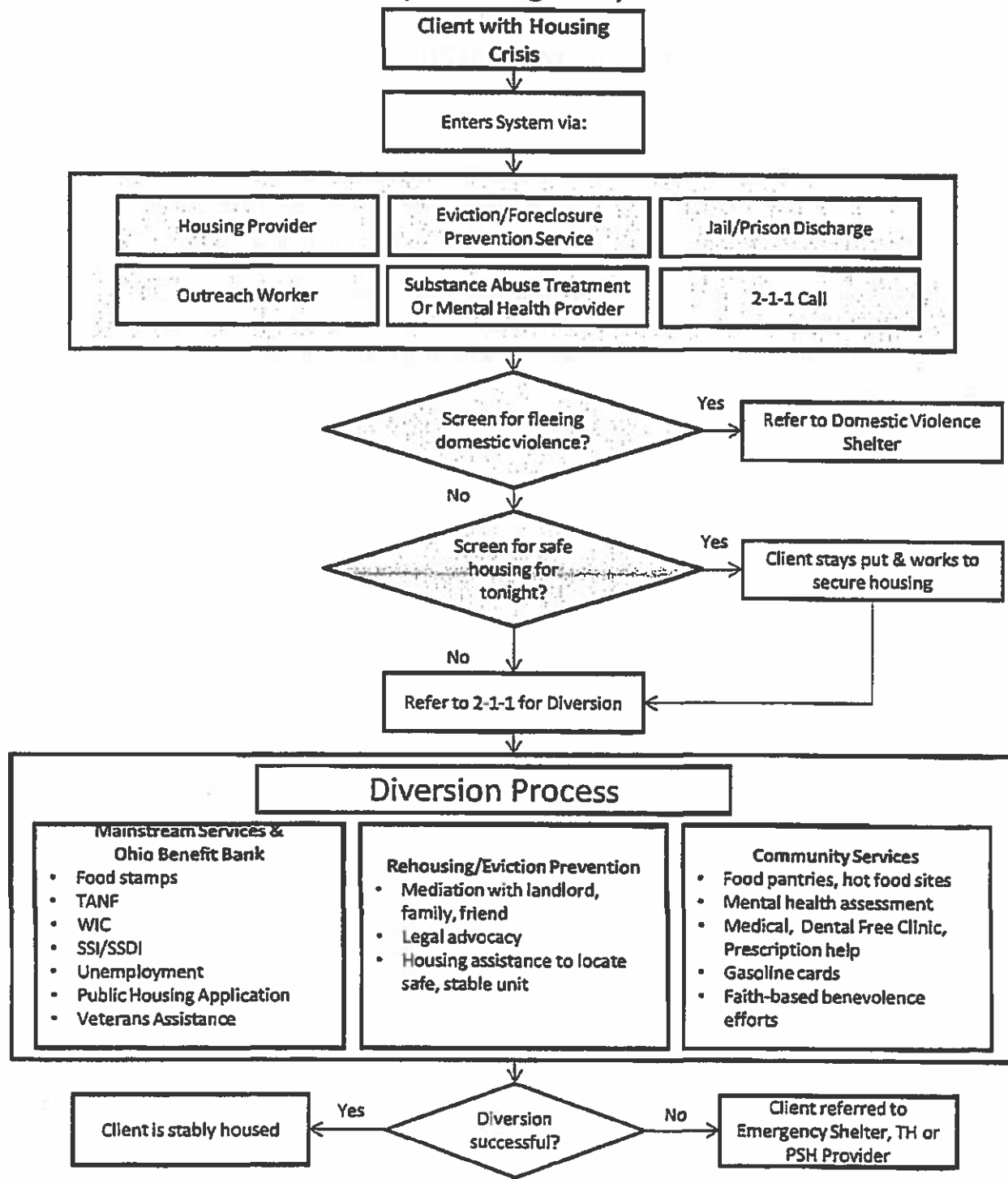


**Proposed Diversion/Coordinated Intake Process  
(No Wrong Door)**

**Housing Crisis Reported**



## High Level Outreach/Diversion Flowchart (No Wrong Door)



# HCRP BARRIER ASSESSMENT

Applicant Name: \_\_\_\_\_ DOB \_\_\_\_\_ DATE \_\_\_\_\_

Circle month in program: Initial 3 6 9 12

Is the household (HH) residing in this county? Y / N If no, refer to county of residence.
Is the total HH gross income below 30% of AMI? Y / N If no, not eligible for HCRP
A "yes" answer to the following 3 questions is required for the household to be HCRP eligible:
Does the household lack subsequent housing options? Y / N
Does the household lack financial resources needed to obtain immediate housing or remain in existing housing? Y / N
Does the household lack the support networks needed to obtain housing or remain in existing housing? Y / N

## **Eviction Assistance to maintain current housing** (reassessments: refer to need at time of program entry)

<i>Risk Factors:</i>	<i>Y / N</i>
1. Does the HH have an eviction notice?	
2. Is the monthly rent more than 50% of the total HH income?	
3. At time of appointment, will the HH be more than 30 days behind in their rent?	
4. Has the HH received an eviction notice within the last 12 months? (do not include current instance)	
5. Are all employable adults in HH unemployed or have unstable income?	
6. Does the HH have 0 income?	
7. At least one employable adult HH member has gone through a 6 month period of time without work in the last 5 years?	
8. At least one adult in the HH has <b>not</b> obtained a GED or higher level of education.	
9. At least one HH member has had a housing subsidy taken away in the past?	
10. Is the current housing crisis related to a recent domestic violence situation?	
11. Does at least one adult HH member have a documented diagnosis or disability?	
<i>Total "Yes" Answers</i>	

Scoring:

1-5 = Level 1: Household can maintain housing on their own.

6-8 = Level 2: HCRP eligible. Level of assistance will be assessed.

9-11 = Level 3: Household needs more intensive services than what HCRP can provide.

<b>Housing Assistance for the Homeless</b> (reassessments: refer to need at time of program entry)	
<i>Risk Factors:</i>	Y/N
1. Is the household (HH) literally or imminently homeless?	
2. Has the HH received an eviction notice within the last 12 months?	
3. Are all the employable adults in HH unemployed or have unstable income?	
4. Does the HH have 0 income?	
5. In the last 5 years, at least one employable adult HH member has gone through a 6 month period of time without work?	
6. At least one adult in the HH <b>has not</b> obtained a GED or higher level of education.	
7. At least one HH member has had a housing subsidy taken away in the past?	
8. Is the current housing crisis related to a recent domestic violence situation?	
9. Does at least one adult HH member have a documented diagnosis or disability?	
10. Does at least one adult HH member have a condition that prevents them from working?	
11. Has at least one HH member been homeless more than 3 times in last 5 years?	
12. Is at least one adult HH member currently experiencing substance abuse or mental health issues?	
13. Does the HH have barriers to securing landlord recommendations?	
14. Does the HH have barriers to getting utilities turned on?	
15. Do any adults in HH have barriers to secure hsg due to criminal background?	
Total "Yes" Answers	

Scoring:

1-4 = Level 1: Household can secure housing on their own.

5-10= Level 2: HCRP eligible. Level of assistance will be assessed.

11-15= Level 3: Household needs more intensive services than what HCRP can provide.

# OHIO BALANCE OF STATE CONTINUUM OF CARE Homeless Planning Regions Reporting Tool

## BACKGROUND

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The Ohio Balance of State Continuum of Care (BoSCoC) Governance Charter (available at [http://www.cohhio.org/information\\_resource/training\\_materials#BoS%20CoC](http://www.cohhio.org/information_resource/training_materials#BoS%20CoC)) requires that Homeless Planning Regions annually solicit new Ohio BoSCoC membership, update their membership lists, and share that membership information with COHHIO, the Ohio BoSCoC Staff Lead. Ohio BoSCoC members are defined as those organizations and persons attending meetings of Ohio BoSCoC Homeless Planning Region committees/workgroups, local CoC groups (i.e, county or city-level homeless/housing coalitions), or Ohio BoSCoC committees/workgroups and/or participating in local homeless planning efforts. Ohio BoSCoC Homeless Planning Regions can determine who is identified as an Ohio BoSCoC member.

Homeless Planning Regions should use this tool to report on their regional Ohio BoSCoC membership as well as their regional organization – ie, regional committees/workgroups and decision-making structure. Each of the following sections must be completed.

**Submit this reporting tool to Coordinated Entry Systems Specialist,  
Cynthia Tindongan: ([cynthiatindongan@cohhio.org](mailto:cynthiatindongan@cohhio.org)) by April 27, 2017**

## OHIO BoSCoC HOMELESS PLANNING REGIONS REPORTING

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Homeless Planning Region Number: <ul style="list-style-type: none"><li>• Provide the number associated with your Homeless Planning Region. See the attached map.</li></ul>	Homeless Planning Region 5
Homeless Crisis Response Program Lead Grantee:	Coleman Professional Services
Regional Representative to Ohio BoSCoC Board: <ul style="list-style-type: none"><li>• Provide the following information about the regional Advisory Committee representative:<ul style="list-style-type: none"><li>○ Name of person</li><li>○ Organizational affiliation</li><li>○ Email address</li></ul></li></ul>	<ul style="list-style-type: none"><li>• Tammy Weaver</li><li>• Coleman Professional Services</li><li>• Tammy.weaver@colemanservices.org</li></ul>

## Regional Executive Committee

Provide basic information about the Regional Executive Committee below, including the primary responsibilities of the group. Provide basic information about each member of the committee as well.

If needed, add more rows to the table below, or simply provide members' basic information in the space below the table.

<b>Regional Executive Committee: Region 10 Executive Committee</b>			
<b>Responsibilities of Group:</b>  <i>Comprised of Lead Grantee and one Representative per County. Oversees all work of the Region; Directly monitors HCRP Program/Region Performance and Outcomes, HMIS, and application process.</i>			
<b>Member Name</b>	<b>Member Organizational Affiliation</b>	<b>Member email Address</b>	<b>Member Position in Group (eg, chair, member, etc)</b>
Tammy Weaver	Coleman Professional Services	Tammy.weaver@colemanservices.org	HCRP Lead Grantee - Chair
Lynn Zalewski	Catholic Charities	lynnz@doyccac.org	Executive Committee Member
Jen Matlack	Family and Community Services	jmatlack@fcsOhio.org	Executive Committee Member
Heather Reznack	Ravenwood Mental Health Center	ReznackH@ravenwoodmhc.org	Executive Committee Member
Sister Jean Orsuto	Emmanuel Community Care Center	jorsuto@hmmhousing.org	Executive Committee Member
Carrie Dotson	LifeLine	carried@lclifeline.org	Executive Committee Member

## Regional Planning Group

Provide basic information about the Regional Planning Group below, including the primary responsibilities of the group. Provide basic information about each member of the Regional Planning Group as well.

If needed, add more rows to the table below, or simply provide members' basic information in the space below the table.

Regional Planning Group: Region 10 Executive Committee			
<b>Responsibilities of Group:</b> <i>Assists in creation of the Homeless Coordination Plan and oversees its implementation. Maintains one Subcommittees: 1) Coordinated Assessment-Workgroup established to develop Coordinated Referral, Screening, Diversion and Assessment processes for the Region, and 2) Annual Homeless Count and Housing Inventory-Workgroup established to oversee training and completion of annual HUD Continuum of Care requirements: Homeless Count and Housing Inventory</i>			
Member Name	Member Organizational Affiliation	Member email Address	Member Position in Group (eg, chair, member, etc)
Tammy Weaver	Coleman Professional Services	Tammy.weaver@colemanservices.org	HCRP Lead Grantee - Chair
Lynn Zalewski	Catholic Charities	lynnz@doyccac.org	Executive Committee Member
Jen Matlack	Family and Community Services	jmatlack@fcsohio.org	Executive Committee Member
Heather Reznack	Ravenwood Mental Health Center	ReznackH@ravenwoodmhc.org	Executive Committee Member
Sister Jean Orsuto	Emmanuel Community Care Center	jorsuto@hmhousing.org	Executive Committee Member
Carrie Dotson	LifeLine	carried@lclifeline.org	Executive Committee Member

## Regional Committees/Sub-committees/Workgroups

Provide basic information about any additional regional committees/sub-committees/workgroups below, including the name given to the group and the primary responsibilities of the group. Provide basic information about each member of the group as well.

If needed, add more rows to the table below, or simply provide members' basic information in the space below the table.

Committee/Workgroup Name: PIT/HIC Workgroup			
<b>Responsibilities of Group:</b> <ul style="list-style-type: none"> <li>Manages and oversees training and completion of annual HUD Continuum of Care requirements: Homeless PIT Count and Housing Inventory Chart (HIC). Works with all counties in region to ensure counts are completed and data is accurate. Compiles all regional data and submits to COHHIO/ODOD as required and in accordance with Ohio BOSCO timelines. Reports to Regional Executive Committee.</li> </ul>			
Member Name	Member Organizational Affiliation	Member email Address	Member Position in Group (eg, chair, member, etc)
Tammy Weaver	Coleman Professional Services	Tammy.weaver@colemanservices.org	HCRP Lead Grantee - Chair
Lynn Zalewski	Catholic Charities	lynnz@doyccac.org	Executive Committee Member
Jen Matlack	Family and Community Services	jmatlack@fcsohio.org	Executive Committee Member
Heather Reznack	Ravenwood Mental Health Center	ReznackH@ravenwoodmhc.org	Executive Committee Member
Sister Jean Orsuto	Emmanuel Community Care Center	jorsuto@hmhousing.org	Executive Committee Member
Carrie Dotson	LifeLine	carried@lclifeline.org	Executive Committee Member
Lisa Day	Coleman Professional Services	<a href="mailto:Lisa.day@colemanservices.org">Lisa.day@colemanservices.org</a>	Committee Member
Jill Valentic	Catholic Charities	jillv@doyccac.org	Committee Member
Jessica Miller	Coleman Professional Services	<a href="mailto:Jessica.miller@colemanservices.org">Jessica.miller@colemanservices.org</a>	Committee Member

## Regional Committees/Sub-committees/Workgroups



Provide basic information about any additional regional committees/sub-committees/workgroups below, including the name given to the group and the primary responsibilities of the group. Provide basic information about each member of the group as well.

If needed, add more rows to the table below, or simply provide members' basic information in the space below the table.

<b>Committee/Workgroup Name:</b> <i>Region 10 Coordinated Assessment Committee</i>			
<b>Responsibilities of Group:</b> <ul style="list-style-type: none"> <li><i>Manages and oversees development of Coordinated Referral, Screening, Diversion and Assessment processes for the Region. Works with all Counties in region to implement Coordinated Processes and deliver appropriate training. Compiles all regional information and submits to COHHIO/ODOD as required and in accordance with Ohio BOSCoC timelines. Reports to Regional Executive Committee.</i></li> </ul>			
<b>Member Name</b>	<b>Member Organizational Affiliation</b>	<b>Member email Address</b>	<b>Member Position in Group (eg, chair, member, etc)</b>
Tammy Weaver	Coleman Professional Services	Tammy.weaver@colemanservices.org	Committee Member
Sister Jean Orsuto	Emmanuel Community Care Center	<a href="mailto:jorsuto@hmmhousing.org">jorsuto@hmmhousing.org</a>	Committee Member
Lynn Zalewski	Catholic Charities	lynnz@doyccac.org	Committee Member
Jill Valentic	Catholic Charities	<a href="mailto:jillv@doyccac.org">jillv@doyccac.org</a>	Committee Member
Tiffany Reid	Community Action Council	treid@accaa.org	Committee Member
Carmen Kuula	Community Action Council	<a href="mailto:ckuula@accaa.org">ckuula@accaa.org</a>	Committee Member
Heather Reznack	Ravenwood Mental Health Center	<a href="mailto:hreznack@ravenwoodmhc.org">hreznack@ravenwoodmhc.org</a>	Committee Member
Carrie Dotson	LifeLine	carried@lclifeline.org	Committee Member
Michelle Meszaris	LifeLine	<a href="mailto:michellem@lclifeline.org">michellem@lclifeline.org</a>	Committee Member
Sarah Masek	Beatitude House	<a href="mailto:smasek@beatitudehouse.com">smasek@beatitudehouse.com</a>	Committee Member
Jessica Miller	Coleman Professional Services	<a href="mailto:Jessica.miller@colemanservices.org">Jessica.miller@colemanservices.org</a>	Committee Member
Lisa Day	Coleman Professional Services	<a href="mailto:Lisa.day@colemanservices.org">Lisa.day@colemanservices.org</a>	Committee Member

## Local Homeless/Housing Coalitions

Provide basic information about the local homeless coalitions (sometimes called local CoCs) in your Homeless Planning Region below, including the counties within each coalition. Provide basic information about the chairs/co-chairs of each group as well.

If needed, add more rows to the table below, or simply provide additional basic information in the space below the table.

<b>Local Homeless Coalition (CoC) Name</b>	<b>Counties Included in Homeless Coalition</b>	<b>Coalition Chair and email address</b>	<b>Coalition Co-Chair and email address</b>
Ashtabula County Housing Council	Ashtabula	Tammy Weaver, tammy.weaver@colemanservices.org	
Geauga County COC	Geauga	Beth Matthews bmatthews@geauga.org	
Lake County Housing Coalition	Lake	Carrie Dotson cdotson@lclifeline.org	
Portage County Housing Council	Portage	Jen Matlack jmatlack@fcsohio.org	
Trumbull County Housing Collaborative	Trumbull	Sister Jean Orsuto, jorsuto@hmhousing.org	

### **Regional Ohio BoSCoC Membership**

Provide basic information about all Ohio BoSCoC members in your Homeless Planning Region below.

If needed, add more rows to the table below, or simply provide members' basic information in the space below the table.

<b>Member Name</b>	<b>Member Organizational Affiliation</b>	<b>Member email Address</b>
Tammy Weaver	Coleman Professional Services	Tammy.weaver@colemanservices.org
Sarah Masek	Beatitude House	smasek@beatitudehouse.com
Christine Lakomiak	Lake County Mental Health and Recovery Board	clakomiak@lakeadamhs.org